PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

PHNL 000183

CLAIMS AS FILED - PART I SMALL ENTITY OF										OTHER	THAN	
_			(Column	1)	(Colu	mn 2)	TYPE [OR	SMALL		
TOTAL CLAIMS			12				RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 () minus 20=		. 0		X\$ 9=		OR	X\$18=	1	
NDEPENDENT CLAIMS			minus 3 =		. 0		X40=		OR	X80=	0	8
/L	ILTIPLE DEPEN	NDENT CLAIM P	RESENT		-	Ø	+135=	N			0	·
lf	the difference	in column 1 is	less than zero, enter		r "0" in c	olumn 2	TOTAL		OR	TOTAL	270	00
	C	LAIMS AS A	MENDER) . PAR	TII	TOTAL		<u> </u>			980	00
		(Column 1)	WENDEL	(Colu	mn 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL I		
A INDINGINIA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	1.4.	RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	** 6	20	= /	X\$ 9=		OR	X\$18=		
	Independent	. 2	Minus	***	3	= /	X40=		OR	X80=		
_	FIRST PRESE	ENTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		+135=		OR	+270=		-
							TOTAL	. 5		TOTAL		
		10.1				5	ADDIT. FEE		OR	ADDIT. FEE		
-		(Column 1)		(Colui		(Column 3)						1
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40=		OR	X80=		
_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		.125			. 270		
							+135= TOTAL	·	OR	+270= TOTAL		
							ADDIT. FEE		OR	ADDIT. FEE	L	ļ
		(Column 1)		(Colu		(Column 3)						
AMENDMEN C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	21.101.00	=	X40=			X80=		
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		-	, ,2	OR	7.00=		
	If the entry in col-	ımn 1 ic loce there t	ho ontre :=	ima O comit	. 40 7 (m)	turna 2	+135=	, ,-	OR	+270=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE TOTAL A												
	ine "Highest Nur	nder Previously Pa	io For" (Total o	r Independ	ent) is the	highest number	tound in the app	ropriate bo	k in co	lumn 1.		ŀ